

# VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

MAR 04 2009

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:		DataMaster cdm S/N <u>130289</u>	
Name <u>Byron D. Redburn</u>		ID# <u>2087</u>	Date <u>3-2-2009</u>
A	Agency <u>Nome Police Dept</u>		Phone # _____
Instrument Location <u>Nome Police Dept</u>			
B	Alco S/N <u>X301548</u>	Target Value <u>.079</u>	High Pressure <u>900</u>
Alco Test Values		<u>.079</u> <u>3.20.09</u> 1 <sup>st</sup> Alco	<u>.079</u> <u>3.20.09</u> 2 <sup>nd</sup> Alco
Signature <u>[Signature]</u>		<u>003</u> <u>3/24/09</u>	
(OVER)			

(Do Not write in the area below)

Under the Alaska Rules of Evidence, I certify that;

(a) I am Jeanne Swartz, Forensic Scientist III, Scientific Crime Detection Laboratory, State of Alaska Department of Public Safety, and was, at the time of signing, the custodian of the records of the aforementioned laboratory and the signature was made in my official capacity as Scientific Director Designee of the State Breath Alcohol Testing Program.

(b) The verification of calibration for the above instrument has been received and reviewed. Instrument operator, Byron D Redburn, whose name appears in my records, is qualified to verify the calibration of the above instrument.

(c) This instrument is certified for evidentiary use and these records are being retained as original documents in my custody.

Signed and sealed,



[Signature]

Jeanne Swartz  
Scientific Director Designee  
State of Alaska  
State Breath Alcohol Testing Program

3/24/09

Date

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of DataMaster cdm breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 130289 ✓

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C

TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

## NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130289

MARCH 02, 2009 ✓

OPERATOR'S NAME:

REIDBURN BYRON D

OPERATOR'S NUMBER: 2007

SUBJECT'S LAST NAME:

VERIFICATION OF CAL

SUBJECT'S FIRST NAME/MI :

A

O.L. #: A

DEPT/AGENCY: ONE1

CASE/REPORT: A

TEST TYPE: V

ALCO TARGET VALUE: .079 ✓

ALCO S/N: X301548 ✓

### --- BREATH ANALYSIS ---

.079 ADJUSTED FOR 30.33 in  
ALCO TARGET .000 02:23  
BLANK TEST .000 02:24  
INTERNAL STANDARD VERIFIED 02:24  
ALCO TV 30.33 in .079 ✓ 02:25  
BLANK TEST .000 02:25  
SUBJECT SAMPLE .000 02:26  
BLANK TEST .000 02:27  
ALCO TV 30.33 in .079 ✓ 02:27  
BLANK TEST .000 02:28

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130289

MARCH 02, 2009 ✓

TIME 02:28

### --- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

SOFTWARE DATE: 02/20/01

WEATERS

SAMPLE CHAMBER: 49c

BREATH TUBE: 42c

BAROMETER: 30.33 in

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

### PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEF  
GHIJKLMNOPQRSTUVWXYZ\]^\_`abcde fghijklmno  
pqrstuvwxyz{|}~"